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## APPLICANTS

Gary J. Ciarelli, Milford, MI;

Melissa L. Koster, New Hudson, MI;

Dragoslav K. Milojevic, Bloomfield Hills, MI; Christopher M. Rennie, Waterford, MI;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 09/824,555 04/02/2001 PAT 6,589,342 *OK JB*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/03/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MI	SHEETS DRAWING 6	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials <i>JB</i>		

## ADDRESS

27572

HARNESS, DICKEY &amp; PIERCE, P.L.C.

P.O. BOX 828

BLOOMFIELD HILLS, MI

48303

## TITLE

METHOD OF OPERATING POWDER PAINT APPLICATOR

FILING FEE  RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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